TREE PLANTING AWARD NOMINATION Form B

CATEGORY:	() Single-Family Residential() Small Non-Residential() Linear () Utility Compan	() Multi-Family Residential() Large Commercial-Industrialy () Other
Project Name:		Tax Map #
Project Number:	Street Addres	ss:
Nominated by:	Non-	ninator's Phone #:
NOMINEE: (Ch	neck One) Developer ()	Builder ()
Name:		Contact Person:
Address:		Phone #:
		Zip
Superintendent:		Phone #:
architects, certific	ed arborist, etc. who worked on the plan.	professionals, e. e., design engineers, landscape Contact Person:
Address:		Phone #:
	Z	ip
Company Name:		Contact Person:
Address:		Phone #:
	Zip	o
Company Name:		Contact Person:
Address:		Phone #:
	Zi _l	

TREE PLANTING AWARD NOMINATION Form B

What percentage of the tree cover requirement was provided overall?			
What percentage of the tree cover provided was met by preservation?			
Use this space to provide other details relevant to this nomination or attach a separate sheet.			